

Buzzi Birthdays Booking Form

Name & Surname: _____

Child's name: _____ Date of birth:

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 Age: _____

Contact Number: _____ Email: _____

Date of Party: _____ Time: 10 - 11AM 11 - 12PM 12 - 13PM 13 - 14PM 14 - 15PM

Size of Party: 0 - 9 Children R1250 (2 coaches) 10 - 25 Children R1650 (2 coaches) 25+ Children R2050 (3 - 4 coaches) Please specify total _____

Location of Party: Home Party Venue Please specify name of venue _____

Transport fees will be calculated from our offices in Sundowner, Randburg according to the distance to the Venue:
0-5km (FREE), 5-10km (R30), 10-15km (R50), 15-20km (R60), 20-30km (R75), 30km + (R100)

Address: _____

Available Space - Please specify the size of the area available for the activities to take place. We would need a rough indication as to ensure we prepare the right lessons to fit into the amount of space available. Please let us know if this area is grassed or if it is concrete as our activities may change accordingly.

Special Instructions - Please let us know if there is anything our coaches need to be aware of, such as allergies etc.

Disclaimer

I, _____, parent/guardian of _____

Hereby declare that he/she may participate in **Buzzi-Birthdays Event**.

(Keeping in mind that, "Buzzi Birthdays and Beyond Potential will constantly endeavour to take such steps as may be reasonably required in the circumstance to do what it can to keep the children out of harm, and free from loss, taking into account what can be reasonably foreseen and provided for in each case": I will not hold Buzzi Birthdays, Beyond Potential or any staff member liable for any injury or loss, sustained as a result of participating in the programme.)

I agree to pay a 50% deposit (according to the Size of the Party) of R_____ with this booking, and the balance (the remaining 50% plus transport fees) on the day before the party. An invoice for the balance will be sent to you on receipt of this form.

Our banking details are:

Beyond Potential, Nedbank Current Account. Branch: Randridge, Code: 151405, Account number: 1016240708.

I understand that should this contract be cancelled within 24 hours before the Party, I will pay the cancellation fee of 50% of the total.

SIGNATURE: _____ DATE: ____ / ____ / ____

We look forward to entertaining your children
in a fun, wholesome and healthy way!

